



Letter to the editor

Methadone & heroin use: A survey of prisoners in police custody

Methadone is the preferred treatment for those addicted to heroin in the UK. At an annual cost of £16 million¹ around 22,000 individuals in Scotland are prescribed methadone.² According to the General Register Office of Scotland, in 2008 there were 574 drugs deaths of which 32% (184) involved methadone.³ "Street methadone" can be purchased as cheaply as £1 for 10 ml, with as little as 50 ml being the fatal dose for an opiate naive adult.⁴

A survey of methadone recipients in police custody was carried out. All prisoners were asked if they continued to use heroin while being prescribed the substitute. The subjects were detained in police offices in the west of Scotland and were from urban and semi rural locations. 135 were administered methadone but only if it was correctly labelled and prescribed by a pharmacist as part of an on-going treatment regime.

Over a period of 7 months, from 1st February 2009 to 1st September 2009, 52% (70) admitted continuing to use heroin. The dose of methadone varied from 15 ml to 145 ml.

The survey results indicated that over half those individuals who had been prescribed methadone, and were arrested by the police, irrespective of the reasons for the arrests, continued to use heroin. and, of course, we know that heroin use is inextricably linked to crime. Previous studies have suggested that a hard core (15%) of heroin addicts remain resistant to methadone treatment and may even increase their offending behaviour while on a methadone programme.⁵

Methadone (or buprenorphine) is the recommended treatment for those who are opioid dependant.⁶ Many prisoners having this treatment are still being charged with offences directly (e.g. 'possession', 'intent to supply') or indirectly (e.g. 'shoplifting', 'theft') linked to heroin addiction. They are being prescribed a medication which is extremely toxic in overdose and often lethal in combination with other drugs and alcohol. A minority are trusted

with up to a week's supply. All are permitted to take away, unsupervised, a weekend dose.

The prescription of unsupervised methadone, and a continued addiction to heroin while on the maintenance programme, may contribute, at least in part, to a readily available supply of 'street methadone' and the frequency of methadone related drugs deaths.

Conflict of interest

The author has no conflict of interest to declare.

References

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